U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 **LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only REC'D ALL 21205
E Question

1. File Number U -

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

, 	1/1/2004 Through: 13/31/2004
Name and address of person filing.	4. Name, file number, and address of labor organization.
Name Louis P. Zogais	Name Directors Guild of America
	Labor Organization File Number 0000 / 8
O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
itreet 7900 SUNSET BLUD.	Street 7920 SUNSET BLVD.
City Los ArgeLes	City Los Angeles
State CA ZIP Code + 4 400 4 6	State CA ZIP Code + 4 9 00 4 6
Position in labor organization. ASSISTANT EXECUTIVE	DIRECTOR
. Held an interest in, engaged in transactions (including loans) with, conetary value from an employer whose employees your organiza	or derived income or other economic benefit of ation represents or is actively seeking to represent.
onetary value from an employer whose employees your organiza	or derived income or other economic benefit of ation represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income.
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income. Lunch meetins w/ Low Shone
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name and address of Employer (including trade name, if any). Name PANA MOUNT P. CIMES Trade Name, if any:	7.a. Nature of Interest, Transaction, or Income. Lunch meetins w/ Low Shone LASON NETATIONS
Name and address of Employer (including trade name, if any). Jame PANA NOW P. CONE	7.a. Nature of Interest, Transaction, or Income. Lunch metrics w/ Low Shore LABOR Retarrans
Name and address of Employer (including trade name, if any). Jame PANA MOUNT P. CTINES Trade Name, if any: 2.0. Box, Bldg., Room No., if any	7.a. Nature of Interest, Transaction, or Income. Lunch meetins w/Low Shone LABOR RELATIONS 3-25-04 7.b. Amount. #25-440 ON 4-27-04: AT SGA'S EXPENSE,
Name and address of Employer (including trade name, if any). Name PARA MOUNT P. CTINES Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 5555 MELAOSE AVE	7.a. Nature of Interest, Transaction, or Income. Lunch meetins w/ Low Shone LASON NETATIONS 2-25-04 7.b. Amount. #25-440
Name and address of Employer (including trade name, if any). Name PARAMOUNT P. CONES Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 5555 MCLADE AVE.	7.a. Nature of Interest, Transaction, or Income. Lunch meetins w/ Low Shane LASON RELATIONS 7.b. Amount. #25 - #40 ON 4-27-04: At DGA'S Expense, I rook Low Shane to Lunch
Name and address of Employer (including trade name, if any). Name PANA MOUNT P. CONES Frade Name, if any: P.O. Box, Bidg., Room No., if any Street 5555 McLno3E AVE. City Hollywood State CA ZIP Code +4 9038-319	7.a. Nature of Interest, Transaction, or Income. Lunch MEETINS W/LON Shane LASON RELATIONS 7.b. Amount. #25 - #40 ON 4-27-04: AT DGA'S EXPENSE, I Took Lou Shane to Lunch
Name and address of Employer (including trade name, if any). Name PANA MOUNT P. CONE Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 5555 MELNOJE AVE. City Hollywood State CA ZIP Code + 4 9 00 38 - 3/9 Signature and verification. The undersigned declares, under penalty	7.a. Nature of Interest, Transaction, or Income. Lunch MEETINS W/Low Share LASON NETATIONS 3 - 35 - 04 7.b. Amount. 435 - 440 ON 4-37-04: AT Scale To Lunch Track Low Share To Lunch 7.b. Amount. 6 Perjury and other applicable penalties of the law, that all of the information anying documents), has been examined by the signatory and is, to the best of the
Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 5555 MELADE AVE. City Hollywood State CA ZIP Code + 4 9 00 38 - 37 9 15. Signature and verification. The undersigned declares, under penalty submitted in this report (including the information contained in any accompa	7.a. Nature of Interest, Transaction, or Income. Lunch MEETINS W/Low Shane LASON NETATIONS 3-25-04 7.b. Amount. 425-440 ON 4-27-04: AT Shane To Lunch Trook Low Shane To Lunch 7.b. Amount. 6.7